



BARBARA K. CEGAVSKE  
Secretary of State  
Elections Division  
101 North Carson Street, Suite 3  
Carson City, Nevada 89701-3714  
Phone: (775) 884-5705  
Fax: (775) 884-5718  
Website: www.nvsos.gov

Office of the  
Secretary of State

*Barbara Cegavske*

Barbara Cegavske  
Elections Division

JStokes

5/25/2016 #2471

State of Nevada  
**Committee for Political Action  
(PAC)**  
Registration Form  
Page 1

ABOVE SPACE IS FOR OFFICE USE ONLY

- ☐ New Registration ☐ PAC (Advocating Passage or Defeat of a Ballot Question)  
☐ Annual (Due on or before January 15th of each year; NRS 294A.230(4)(b))  
☒ Amended Registration: ☒ Change Officers ☒ Change Registered Agent ☐ Change Address  
check all that apply  
☐ Change Name ☐ Previous Name of PAC  
☐ Other:

Name of Committee:

The Alpha PAC

Telephone:

775-600-5179

Mailing Address:

840 S. Rancho Drive #4-223

Las Vegas

NV 89106

Street Name, Number

City

State Zip Code

PAC Active Email Address:

**PURPOSE:** Briefly state the purpose for which the PAC was organized.

To Promote Limited Government, pro-business, individual liberty issues and candidates in the state of Nevada.

**REGISTERED AGENT:** pursuant to NRS 294A.240, each PAC must appoint and keep in the State a registered agent, as provided in NRS 14.020, who must be a natural person who resides in the State of Nevada.

Name of Registered Agent:

Telephone:

Zarquis L Garcia

Physical Address:

840 S. Rancho Drive #4 223

Las Vegas

NV 89106

Street Name, Number

City

State Zip Code

**REGISTERED AGENT ACCEPTANCE:** I hereby accept appointment as Registered Agent for the above named Committee for Political Action.

Date:

X

Signature of Registered Agent



BARBARA K. CEGAVSKE  
Secretary of State  
Elections Division  
101 North Carson Street, Suite 3  
Carson City, Nevada 89701-3714  
Phone: (775) 684-5705  
Fax: (775) 684-5718  
Website: www.nvsos.gov

State of Nevada  
**Committee for Political Action  
(PAC)**  
Registration Form  
Page 2

**OFFICERS:** List the name, title, address and telephone number of each officer (attach additional pages if necessary).

Officer Name and Title:  Telephone:

Zarquis L Garcia, Chairman

Mailing Address:

840 S. Rancho Drive #4-223 Las Vegas NV 89106  
Street Name, Number City State Zip Code

Officer Name and Title:  Telephone:

Mailing Address:

Street Name, Number City State Zip Code

Officer Name and Title:  Telephone:

Mailing Address:

Street Name, Number City State Zip Code

Officer Name and Title:  Telephone:

Mailing Address:

Street Name, Number City State Zip Code

**AFFILIATIONS:** If the PAC is affiliated with any other organizations, list the name, address and telephone number of each organization (please attach additional pages if necessary).

Name of Organization:  Telephone:

Mailing Address:

Street Name, Number City State Zip Code

Name of Organization:  Telephone:

Mailing Address:

Street Name, Number City State Zip Code

Name of Organization:  Telephone:

Mailing Address:

Street Name, Number City State Zip Code

**SUBMITTED BY:**

Signature of Representative of Group

Printed Name:  Date:  Telephone:   
Zarquis L. Garcia 5-24-2016